DIVISION OF ENVIRONMENTAL PROTECTION BUREAU OF AIR POLLUTION CONTROL 333 WEST NYE LANE CARSON CITY, NEVADA 89706-0851 (775) 687-4670

REQUEST FOR CHANGE OF LOCATION **CLASS II GENERAL PERMIT**

For Temporary Sand and Gravel Processing Plants, Hot Mix Asphalt Facilities, and **Concrete Batch Plants**

Company Name			
Company Address			
Contact Person			: No
Title		Fax No	
Class II General Permit #			
Anticipated Date of Construct	tion	_ Anticipated Da	ate of Initial Startup
Control)			by the Chief of the Bureau of Air Pollution (Please document exact physical location)
Eccation Section(s)	Township	Range	i.e. Off of US 50 East, Left at Exit 47, Drive 3.2 miles; Left on Pickering Road)
UTM Coordinates:N	E km		
Does any other temporary or star	tionary source exist at or	near this location?	Yes No If yes, please explain
Material being processed is me Date of initial performance test of			vith NSPS
PLEASE ATTACH THE FOI 1. PROCESS FLOW D		AN OF THE EQ	UIPMENT AS IT WILL BE SET UP,

- INCLUDING IDENTIFICATION OF ALL POLLUTION CONTROL(S) AND WHICH EMISSION UNITS ARE CONTROLLED BY THESE DEVICES. ALL EMISSION UNITS MUST BE IDENTIFIED BY NAME.
- A NARRATIVE WHICH DETAILS THE FLOW OF MATERIAL AS SHOWN IN THE PROCESS 2. FLOW DIAGRAM / PLOT PLAN.
- 3. TOPOGRAPHIC MAP INDICATING EXACT LOCATION OF EQUIPMENT.

PLEASE ENCLOSE \$100.00 FILING FEE, PER EMISSION UNIT, FOR LOCATION CHANGE IN ACCORDANCE WITH NEVADA ADMINISTRATIVE CODE 445B.331. ONLY ONE NEW LOCATION MAY BE SPECIFIED ON THIS FORM (I.E., ALL EQUIPMENT LISTED ON THIS FORM MUST BE **MOVING TO THE SAME LOCATION).**

Form 1 - Change of Location Equipment List/Emission Calculation Form

A		7	В	C	$egin{array}{ c c c c c c c c c c c c c c c c c c c$	E	F	\mathcal{G}	Н	I	J	K	T
Units	;	IOCD Conducte	IOCD Conducted	Req Thro	Requested Throughput	(please use	Emission Factor (please use separate pages for PM & PM10)	Factor es for PM &	¿ PM10)	Opé H	Operating Hours	Emi	Emissions
Description	Serial/ Equip. No.	Yes	No	ST/hr	Tons/Job	Pollutant	Value	Units	Ref.	Hrs/ Day	Hrs/Job	$\underset{(=C^*F^*I)}{lb/day}$	ST/job (=D*F/2000)
Example 1: Primary crusher		X		400	400,000	PM10	0.00059	lb/ton	IV.A.1.a	8	1,000	1.888	0.118
Example 2: Conveyor & xfer to screen		X		400	400,000	PM10	0.000048	lb/ton	IV.A.1.a	8	1,000	0.154	9600.0
NAQP9-1				1									

NAQP9-1 Rev. 05/02

Instructions for Preparing Form 1

- 1. Determine the list of equipment that will be requested to operate at the new location. Identify the emission units associated with the equipment and enter each unit under Column A of Form 1 and include the equipment number or serial number in the box to the right of the equipment. Duplicate Form 1 as needed.
- 2. Initial Opacity Compliance Demonstration (IOCD) performed. If the answer is No, please note that an IOCD must be conducted within 10 days of commencement of operation of the emission unit under COLA, if issued, and be submitted to the Bureau of Air Pollution Control, Compliance/Enforcement Branch, within 10 days of completion.
- 3. On the same row as the first emission unit, enter the requested hourly throughput in Column C. Then enter the total throughput for the job location in Column D.
 - NOTE: The throughput should be entered in units that are appropriate for the emission factor entered (except asphalt plants controlled by a baghouse or wet scrubber), as described in Instruction 4 below. (*Eg. If the emission factor for a particular piece of equipment is 0.00059 lb/ton, then the throughput requested for that equipment should be expressed in terms of tons of material processed.*)
- 4. Determine the appropriate emission factor for the emission unit (be sure to consider the type of emission controls installed on the equipment) and enter the pollutant ID in Column E, the factor value in Column F and the units of the factor in Column G. The factor must be obtained from the emission factor reference tables contained in Section IV of the Class 2 General Operating Permit for Temporary Sources. Enter the reference in Column H. (Eg. Section IV.A.1 of the General Operating Permit presents emission factors for nonmetallic mineral processing equipment utilizing wet dust suppression as a control. According to this section of the General Operating Permit, the emission factor for a primary crusher is 0.00059 lb/ton of PM10. Therefore, in this example the pollutant ID "PM10" would be entered in Column E, the value of 0.00059 would be entered in Column F, the emission factor units of "lb/ton" would be entered in Column G and the emission factor reference of "IV.A.1.a" would be entered in Column H for this piece of equipment.)
- 5. Enter the requested operating hours for the requested location in Columns I and J.
- 6. Determine the emissions for each emission unit for which a change of location is requested. Calculate the maximum daily emission rate (Column K) for emission unit by multiplying the value in Column C by the value in Column F, multiplying the result by Column I, and entering the result in Column K. Next determine the maximum total emissions for the job by multiplying the value in Column D by the value in Column F, dividing the result by 2000 and entering the value in Column L.
- 7. Repeat steps 2 through 5 for each emission unit listed in Column A as described in Step 1.
- 8. Sum all entries in Columns K & L for the same Pollutant ID's and enter the totals at the bottom of Columns K & L, at the end of the equipment list. These values are the total emission inventory for each pollutant for the requested location and must be less than the maximum values indicated in Section I.A.1 of the Class II General Operating Permit for Temporary Sources.

NOTE: IF ALL APPLICABLE INFORMATION IS NOT COMPLETED, THE REQUEST FOR CHANGE OF LOCATION WILL BE CONSIDERED INCOMPLETE AND WILL BE RETURNED. FURTHER, THE BUREAU WILL ASSUME THAT THE METHOD OF CONTROL FOR EACH PIECE OF EQUIPMENT INDICATED IS CONSISTENT WITH THE EMISSION FACTOR CHOSEN FOR THE EMISSION CALCULATIONS PROVIDED.

I certify that, based on information and belief formed after reasonable inquiry, the statements contained in this application are true, accurate and complete.

x
Signature of Responsible Official*
Print Name of Responsible Official
Title
Title
Date Signed

*As defined in NAC 445B.156 NAQP9-1 Rev. 5/02